ENGIE

GAS SAFETY CERTIFICATE

This form can be used as a Landlord's gas safety certificate

Page 2 of 2 Ser No. 049920

GAS safe REGISTER

198524

Enter Company Registration Number

Engineer [redacted]

Gas Safe [redacted]

Engie Office Address 14A ENDCLIFFE AVE SHEFFIELD S10 3EA.

Contract Number

Customer Name RAVENSTONES A-B

Site Address 2 WOODHEAD WAY. SHEFFIELD

Postcode S10 3AS

Received By NO ONE Signature

Landlords Details If Different

Name

Address

Postcode

Rented Accommodation YES/NO

App	Landlords appliance Yes/No	Service Inspection Repair	Appliance Details: Location	Type	Model	Serial Number	Burner Manufacturer	Flue Type (OF/RS/FL)
1	YES	SERVICE	PLANT ROOM	BOILER 1 HOT WATER	REMEHA QUINTA PRO 115	1115802410500	BRUAG	RS
2								
3								
4								

General Safety Checks	Result	General Safety Checks	Result
Gas booster/compressor operating correctly (Yes /No/NA) S/M	YES	Flue termination satisfactory (Yes/No/NA)	YES
Is there a current gas installation line diagram at primary meter (Yes/No/NA)	YES	Has a tightness test been carried out from local isolation valve (Yes/No/NA)	YES
Is the meter installation correct (Yes/No)	YES	Is gas pipework electrically bonded (Yes/No)	YES
Gas installation pipework adequately supported (Yes/No)	YES	Are adequate emergency isolation valves fitted (Yes/No)	YES
Gas installation pipework sleeved and sealed as appropriate (Yes/No)	YES	Are emergency valve handles in place and labelled (Yes/No)	YES
Is gas pipework colour coded or identified (Yes/No/NA)	YES	Do valves fail to the correct position (Yes/No)	YES
Is flue system installed in accordance with standards (Yes/No)	YES	Area clear of combustible materials (Yes/No)	YES

Ventilation			
Low level free area cm² ~~or ventilation flow rate inlet m³/h~~	Actual 1948	Required (Calculated)	RS 0
High level free area cm² ~~or ventilation flow rate extract m³/h~~	Actual 1948	Required (Calculated)	RS 0
All ventilation grills clear and unobstructed (Yes/No)		Fans and/or flue interlocks operating correctly (Yes/No/NA)	

Details of any faults	Remedial Action Taken	Comments and calculations

Appliance Checks	App 1 or App 1 High	App 2 or App 1 Low	App 3 or App 2 High	App 4 or App 2 Low
Flue flow test satisfactory (Yes/No/NA)	NA	NA		
Spillage test satisfactory (Yes/No/NA)	YES	YES		
Air/Gas switch operating correctly (Yes/No/NA)	NA	NA		
Flame proving devices operating correctly (Yes/No/NA)	YE	YES		
Burner lock out time (seconds)	82	82		
Temperature and limit thermostats operating correctly (Yes/No)	YES	YES		
Heat net input rating data (kW)	114	114		

	App 1 or App 1 High	App 2 or App 1 Low	App 3 or App 2 High	App 4 or App 2 Low
Gas burner pressure (mbar) or heat input kW/h required	21	21		
Gas burner pressure (mbar) or heat input kW/h measured	22	23		
Gas rating measured (kW/h ~~NA~~) NET	104.9	19.6		
Air/gas ratio control setting (%/NA)	NA	NA		
Net flue gas temperature (gross less ambient) (°C)	34.1	32.0		
Oxygen (O_2 %)	5.1	4.9		
Carbon Monoxide (CO)(ppm)	41	10		

	App 1 or App 1 High	App 2 or App 1 Low	App 3 or App 2 High	App 4 or App 2 Low
Carbon Dioxide (CO_2) (%)	9.0	9.1		
Excess Air (%)	32.4	30.4		
CO/CO_2 Ratio	0.0005	0.0001		
Gross Efficiency (%)	98.5	98.6		
CO flue dilution (ppm)	NA	NA		
Standing pressure (mbar)	23	23		
Working pressure (mbar)	22	23		
Is appliance safe for use (Yes/No)	YES	YES		
Has a warning advice notice been raised (No or Warning notice Ser No or No's)	NO			
Test Instrument	KANE 958			
Test Instrument serial number	121722001			

Worksheet No (if used)	
Checked by (office use)	
Entered on database	

Declaration of gas safety - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (installation and use) regulations, standards and procedures.

Date 19-07-22

Signature [redacted]

[redacted]ow - Service Centre, Pink - Site, Green - Engineer